

BR

CJA 23
(Rev. 5/98)

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES
IN THE CASE OF MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

4 SA VS. BIBBIE

FOR NDILL ED
AT CHGO IL

LOCATION NUMBER

IL NCC

PERSON REPRESENTED (Show your full name)

MELVIN BIBBIE

FILED

CHARGE/OFFENSE (describe if applicable & check box →)

 Felony
 MisdemeanorAug 4, 2008
AUG 4 2008

- 1 Defendant - Adult
 2 Defendant - Juvenile
 3 Appellant
 4 Probation Violator
 5 Parole Violator
 6 Habeas Petitioner
 7 2255 Petitioner
 8 Material Witness
 9 Other (Specify) _____

DOCKET NUMBERS

Magistrate

District Court

08 CR 605

Court of Appeals

UNITED STATES DISTRICT COURT

EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self Employed				
	Name and address of employer: _____				
	IF YES, how much do you earn per month? \$ _____				
	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No				
ASSETS	IF YES, how much does your Spouse earn per month? \$ _____				
	IF NO, give month and year of last employment 2006 How much did you earn per month? \$ 250				
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY \$ 2500 BOND FEE SOURCES 100/MO LINK CARD				
CASH	Have you any cash on hand or money in savings or checking account <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ 500				
PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	VALUE	DESCRIPTION			
IF YES, GIVE THE VALUE AND \$ _____ DESCRIBE IT _____					
OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents 3	List persons you actually support and your relationship to them 3 CHILDREN	
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME: Just released From custody	Creditors	Total Debt	Monthly Payt.
				\$ _____	\$ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) 8/4/08

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

Melvin Bibbie